PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

or Fax (571)-273-2885



INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

appropriate. All further indicated unless correcte maintenance fee notifical	ed below or directed oth	g the Pate erwise in	nt, advance of Block 1, by (a	ders and notification of r) specifying a new corres	naintenance fees w spondence address;	ill be mailed to the curr and/or (b) indicating a	ent correspondence address as separate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)					(s) Transmittal. This	s certificate cannot be us	d for domestic mailings of the ed for any other accompanying iment or formal drawing, must on.	
46073	7590 06/08	/2007		nave				
IBM CORPORATION (VE) C/O VOLEL EMILE P. O. BOX 162485					Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
AUSTIN, TX 78	3716						(Depositor's name)	
						- 910	(Signature)	
							(Date)	
APPLICATION NO.	FILING DATE			FIRST NAMED INVENTOR		ATTORNEY DOCKET NO	CONFIRMATION NO.	
10/087,939	9 02/27/2002			eanna Lynn Quigg Brown AUS920010896US1			5277	
		,	·	ING TWO-BYTE IP IDE				
APPLN. TYPE	SMALL ENTITY	ISSUE	FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOTAL FEE(S)	DUE DATE DUE	
nonprovisional	NO		1400	\$300	\$0 - 8978472	\$1700 2007 AWONDAF2 00000	09/10/2007 3060 090447 10087939	
EXAMINER		ART UNIT		CLASS-SUBCLASS	01 FC:1			
HSU, ALPUS 2616			2616	370-392000	02 FC:	1564 390.60	DA	
 Change of correspondence address or indication of "Fee Address" (37 CFR 1,363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 				2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
· · · · · · · · · · · · · · · · · · ·		TO BE P	PINTED ON	L	·		-	
				• •		ce is identified below, the	ne document has been filed for	
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)								
International Business Machines Corporation Armonk, NY 10504								
Please check the appropr	iate assignee category or	categories	(will not be pr	rinted on the patent):	Individual 🖫 Co	rporation or other private	group entity Government	
4a. The following fee(s) are submitted: Leaue Fee Publication Fee (No small entity discount permitted) Advance Order - # of Copies				b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number				
5. Change in Entity Sta	tue (from status indicate	d abova)		Overpayment, to Dept	Sit Account Nambe	1 <u>07-074</u> + (encio	se an extra copy of this form).	
a. Applicant claim	s SMALL ENTITY state	is. See 37				L ENTITY status. See 3		
NOTE: The Issue Fee an interest as shown by the	d Publication Fee (ft req records of the United Sta	uired) Vill tes Patent	not be accepte and Trademark	d from anyone other than to Office.	the applicant; a regis	stered attorney or agent;	or the assignee or other party in	
Authorized Signature	- I fait	15	Lui	L_	Date	06/19/2007		
Typed or printed name Volel Emile				Registration No. 39,969				
This collection of inform an application. Confiden submitting the completes	ation is required by 37 C tiality is governed by 35	FR 1.311. U.S.C. 12	The information and 37 CFR	on is required to obtain or 1.14. This collection is est	retain a benefit by the	ne public which is to file ninutes to complete, incluments on the amount	(and by the USPTO to process) uding gathering, preparing, and of time you require to complete	

Submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing his burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.